

Gonorrhea

Definition: A sexually transmitted disease caused by the bacterium *Neisseria gonorrhoeae*. Symptomatic women often have abnormal vaginal discharge or painful urination; approximately 50% of women do not experience symptoms. Men usually have a discharge from the penis and painful urination that may be severe. ICD-9 code 098

Summary

In 1994, 2,893 cases of gonorrhea (1,523 males and 1,370 females) were reported among Washington residents for an incidence rate of 54/100,000, the lowest since 1960. The most common consequence of untreated gonorrhea is pelvic inflammatory disease (PID) which can cause infertility, ectopic pregnancy, and chronic pelvic pain. In 1994, 175 cases of gonococcal PID were reported in Washington. Infected pregnant women can transmit gonorrhea to their infants at birth. In 1994 there was one case of a gonococcal eye infection in a newborn in Washington.

Time Trends

In Washington, as in the rest of the US, the advent of effective non-barrier contraception, the onset of sexual maturity in the baby boom generation, and changes in sexual behavior in the early 1960s resulted in an increase of reported cases of gonorrhea. From the 1960s through the mid-1970s, cases increased by about 15% per year. Large-scale national screening programs for gonorrhea in women began in the early 1970s. After an initial increase in cases detected through screening, gonorrhea rates for both women and men generally declined throughout the 1980s and early

1990s with a slight increase in the mid-1980s. Part of this decline was probably due to these screening efforts and changes in sexual behavior that were adopted as a result of the HIV epidemic.

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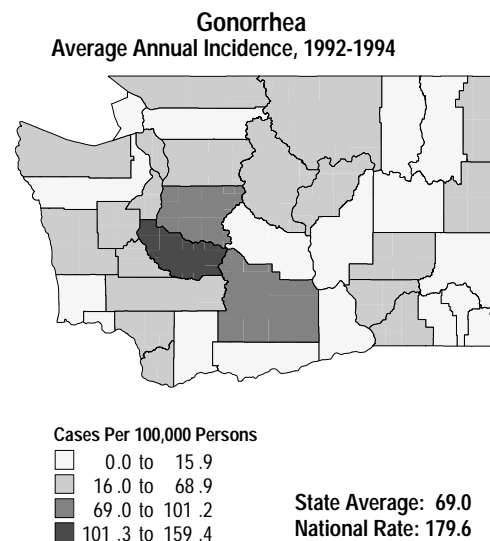
Year 2000 Goal

Washington's goal for the year 2000 is to reduce the rate of gonorrhea incidence to no more than 60/100,000. This was achieved in 1994 with an incidence rate of 54/100,000.

It is anticipated that low rates of gonorrhea will continue.

Geographic Variation

The average annual incidence rate from 1992 through 1994 was 69/100,000 in Washington, compared to 180/100,000 for the United States. The Washington counties with the highest average incidence rates (above the Washington goal) were



Pierce, King, Yakima and Kitsap. Lower rates were distributed throughout the state, with five rural counties (Columbia, Garfield, Lincoln, San Juan and Wahkiakum) reporting no disease.

King and Pierce counties accounted for 73% of state morbidity during these years, with Pierce County having the highest average incidence rate.

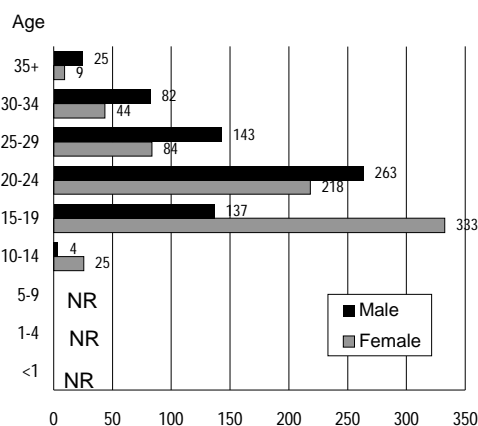
Both Pierce and Kitsap are impacted by the presence of large military populations in their counties. In Pierce county 19% of gonorrhea morbidity was reported from military bases, and 47% in Kitsap county.

Age and Gender

Men with gonorrhea are usually symptomatic and seek care; therefore, trends among men are considered a relatively good indicator of incidence of disease; trends in women are often determined by screening patterns, similar to chlamydia. It is possible that the expansion of chlamydia screening programs for women (especially for younger women) is having an indirect beneficial effect on gonorrhea detection and treatment among women as well.¹

Of the 2,893 gonorrhea cases in 1994, 1,523 (53%) were among males and 1,370 (47%) were among females. Statewide, 30% of reported gonorrhea occurred in teenagers; 17% of male cases and 44% of female cases were teenagers. Gonorrhea incidence rates were highest among sexually active adolescents and young adults; the highest rates were among 15-19 year old females (333/100,000) and 20-24 year old males (263/100,000).

**Gonorrhea
by Age and Gender**
Reported Incidence per 100,000, Wash., 1994

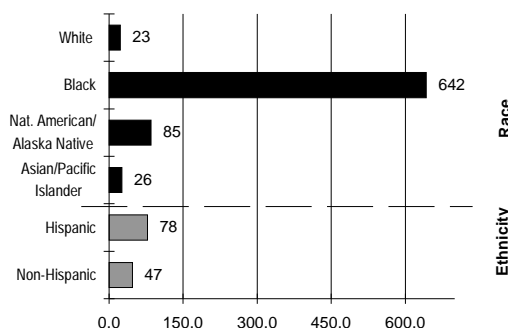


Race and Ethnicity

Statewide, the highest gonorrhea incidence rates in 1994 were among Blacks (642/100,000) followed by Native Americans/Alaska Natives (85/100,000), Asian/Pacific Islanders (26/100,000) and Whites (23/100,000). The rate for persons of Hispanic origin was 78/100,000 and 47/100,000 for non-Hispanics.

The gonorrhea rate among 15-19 year old Black adolescents (2,150/100,000) was more than 22 times greater than the rate among White adolescents (97/100,000).

**Gonorrhea
by Race and Ethnicity**
Reported Incidence per 100,000
Wash., 1994



Other Measures of Impact and Burden

For many STDs the impacts and burdens are similar (see Chlamydia section for a discussion of these common factors).

Risk and Protective Factors

Risk and protective factors are similar for a number of STDs (see Chlamydia section).

High Risk Groups

The high risk groups for STDs are often the same (see Chlamydia section).

Intervention Points, Strategies and Effectiveness

The interventions are often alike for STDs (see Chlamydia section).

Data Sources

State morbidity data: Washington Department of Health, Infectious Disease and Reproductive Health, Office of STD Services.

National morbidity data: Centers for Disease Control

For More Information

Washington Department of Health, Infectious Disease and Reproductive Health, Office of STD Services, (360) 753-5810.

Endnotes:

¹Division of STD Prevention. Sexually Transmitted Disease Surveillance, 1994. U.S. DHHS, Public Health Service. Atlanta: Centers for Disease Control and Prevention, September 1995, p 2